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CONFIRMATION NO. 9464

SERIAL NUMBER 10/801,086	FILING OR 371(c) DATE 03/15/2004 RULE	CLASS 707	GROUP ART UNIT 2165	ATTORNEY DOCKET NO. 17101.0003U2	
APPLICANTS N. Stephen Ober, Southboro, MA; John Grubmuller, Bedford, NH; Maureen Farrell, Bedford, MA; Charles Wentworth, Attleboro, MA; Tom Gilbert, Holliston, MA; Kevin Barrett, Sherborn, MA; Steven Davis, Brookline, MA; Erik Nordman, Waltham, MA; Randell Grenier, Waltham, MA;					
** CONTINUING DATA ***** This application is a CON of 09/665,420 09/20/2000 PAT 6,732,113 which claims benefit of 60/154,726 09/20/1999 <i>Yes! TM.</i>					
** FOREIGN APPLICATIONS ***** <i>None TM.</i>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/31/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Tork</i> <i>TM</i> Examiner's Signature Initials		STATE OR COUNTRY MA	SHEETS DRAWING 17	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
ADDRESS 23859					
TITLE System and method for generating de-identified health care data					
FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		